PTO/SB/06 (07-06)

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Substitute for Form PTO-875							10/566,374			21/2006	To be Mailed
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY				HER THAN
Н	FOR		NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)	OR	RATE (\$)	FEE (\$)
\boxtimes	BASIC FEE		N/A		N/A		N/A		1	N/A	300
\boxtimes	(37 CFR 1.16(a), (b), SEARCH FEE		N/A		N/A		N/A		ł	N/A	500
	(37 CFR 1.16(k), (i), EXAMINATION FI		N/A		N/A		N/A		1	N/A	200
	(37 CFR 1.16(a), (p), FAL CLAIMS	or (q))	20 mir	us 20 =	N/A	l	x s =		OR	X \$50 =	0
	CFR 1.16(i)) EPENDENT CLAIN	IS .		_		ı			-		
(37	CFR 1.16(h))	If the			age avanged 100	ı	x \$ =		1	X \$200 =	0
If the specification and drawings exceed 100 sheets of paper, the application size feet us is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).											
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))						ı			1		
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		J	TOTAL	1000
APPLICATION AS AMENDED – PART II (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST								L ENTITY	OR		ER THAN ALL ENTITY
AMENDMENT		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.18(i))		Minus	**			x \$ =		OR	x s =	
	Independent (37 CFR 1.16(h))	•	Minus	***	=		x \$ =		OR	x s =	
	Application Size Fee (37 CFR 1.16(s))								╙		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					ı			OR		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)						
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1,18(i))		Minus		=		x \$ =		OR	x s =	
	Independent (37 CFR 1.16(h))	*	Minus	***	:		x \$ =		OR	x \$ =	
	Application Size Fee (37 CFR 1.16(s))					ı			1		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					l			OR	I	
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
If the entry in column 1 is less than the entry in column 2, write "O" in column 3. If the "Highest Number Previously Paid or "O IT HIS SPACE is less than 20, enter "20". If the "Highest Number Previously Paid For "IN THIS SPACE is less than 3, enter "3". When the "Highest Number Previously Paid For "(To IT HIS SPACE is less than 3, enter "3". When the "Highest Number Previously Paid For "(To IT HIS SPACE is less than 5, enter "3".											

has collection of information is organic by 37 CFR. 1,10. The information is required to obtain or retain a benefit by the public which is in to file under by the USFTO to process) an application. Confidentiality is operend by 38 US 6.C. 122 and 37 CFR. 14. This collection is estimated to the bit 2 minutes to complete incurring preparing, and submitting the completed application form to the USFTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suppleacions for reducing this borton, although the sent to the Child referension Officer. U.S. Plants and Tridenank Office. U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.